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APPLICATION NO.	FILING DATE	FIRS	T NAMED INVEN	ITOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/986,445	09/986,445 11/08/2001		Young-Rae Park		SEC.848	5077
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Authorized Signature) ADI	C. VOLENTINE	(Date) 02/09 #33,289	2/09/04 02/12/2004		CCHAU2 00000141 09986445	
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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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## TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity) Docket No. (37 C.F.R. 1.311) **SEC.848** Applicant(s): Young-Rae PARK et al. Serial No. Filing Date Examiner Group Art Unit Confirmation No. 09/986,445 Scott B. Geyer 2829 5077 November 8, 2001 Invention: METHOD FOR FABRICATING A CONTACT PAD OF SEMICONDUCTOR DEVICE Mail Stop Issue Fee TO THE COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450 Transmitted herewith are the following for the above-identified application. ☑ Issue Fee Transmittal Form PTOL-85 Utility Fee: Design Fee: ☐ Plant Fee: \$ 1330.00 Publication Fee: \$ 300.00 $\boxtimes$ A check in the amount of \$1,645.00 is attached. $\boxtimes$ The Director is hereby authorized to charge and credit Deposit Account No. 50-0238 as described below. Charge the amount of $\boxtimes$ Credit any overpayment. Charge appadditional fee required. Dated: FEBRUARY 9, 2004 Signature ADAM C. VOLENTINE REG. NO. 33,289 **VOLENTINE FRANCOS, P.L.L.C.** 12200 SUNRISE VALLEY DRIVE, SUITE 150 **RESTON, VA 20191** TEL. NO.: (703) 715-0870 CC: Certificate of Transmission by Facsimile This certificate may only be used if paying Certificate of Mailing by First Class Mail by deposit account. I certify that this document and authorization to charge I certify that this document and fee is being deposited deposit account is being facsimile transmitted to the United with the U.S. Postal Service as States Patent and Trademark Office (Fax No. first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. Date Signature of Person Mailing Correspondence Signature Typed or Printed Name of Person Signing Certificate Typed or Printed Name of Person Mailing Correspondence